AMENDMENTS TO THE CLAIMS

1. (Currently Amended) A method of treating or managing a myeloproliferative disease, which comprises

(a) administering to a patient having the myeloproliferative disease a therapeutically or prophylactically effective amount of cyclopropanecarboxylic acid {2-[(1*S*)-1-(3-ethoxy-4-methoxy-phenyl)-2-methanesulfonyl-ethyl]-3-oxo-2,3-dihydro-1*H*-isoindol-4-yl}-amide, or a pharmaceutically acceptable salt thereof for a period of time followed by rest; and

(b) repeating step (a),

wherein the myeloproliferative disease is selected from the group consisting of polycythemia rubra vera, primary thrombocythemia, chronic myelogenous leukemia and agnogenic myeloid metaplasia, and wherein the therapeutically or prophylactically effective amount is from about 5 mg to about 50 mg per day.

2. (Canceled).

3. (Currently Amended) A method of treating or managing a myeloproliferative disease, which comprises

(a) administering to a patient having the myeloproliferative disease from about 5 mg to about 50 mg per day of cyclopropanecarboxylic acid {2-[(1*S*)-1-(3-ethoxy-4-methoxy-phenyl)-2-methanesulfonyl-ethyl]-3-oxo-2,3-dihydro-1*H*-isoindol-4-yl}-amide, or a pharmaceutically acceptable salt thereof, and a therapeutically or prophylactically effective amount of at least one second active agent, for a period of time followed by rest; and

(b) repeating step (a),

wherein the myeloproliferative disease is selected from the group consisting of polycythemia rubra vera, primary thrombocythemia, chronic myelogenous leukemia and agnogenic myeloid metaplasia.

4. (Canceled).

5. (Previously Presented) The method of claim 1 or 3, wherein the patient is refractory to a conventional myeloproliferative disease treatment.

6. (Previously Presented) The method of claim 1 or 3, wherein the patient is refractory to a myeloproliferative disease treatment comprising thalidomide.

7. (Previously Presented) The method of claim 3, wherein the second active agent is capable of suppressing the overproduction of hematopoietic stem cells or ameliorating one or more of the symptoms of the myeloproliferative disease.

8. (Previously Presented) The method of claim 3, wherein the second active agent is a cytokine, corticosteroid, ribonucleotide reductase inhibitor, platelet inhibitor, anticoagulant, thrombolytic agent, antifibrosis agent, all-trans retinoic acid, kinase inhibitor, topoisomerase inhibitor, farnesyl transferase inhibitor, antisense oligonucleotide, antibody, agent used to reverse multidrug resistance, vaccine, myelosuppressive agent or anti-cancer agent.

9. (Original) The method of claim 8, wherein the second active agent is interferon-α, hydroxyurea, anagrelide, busulfan, arsenic troxide, ST1571, imatinib mesylate, DX-8951f, R115777, vincristine, daunorubicin, prednisone, or a pharmacologically active mutant or derivative thereof, or a combination thereof.

10. (Canceled).

11. (Previously Presented) The method of claim 1 or 3, wherein the myeloproliferative disease is primary or secondary.

12-14. (Canceled).

15. (Previously Presented) The method of claim 1 or 3, wherein the compound is enantiomerically pure.

16-21. (Canceled).

22. (Currently Amended) A method of treating or managing a myeloproliferative disease, which comprises

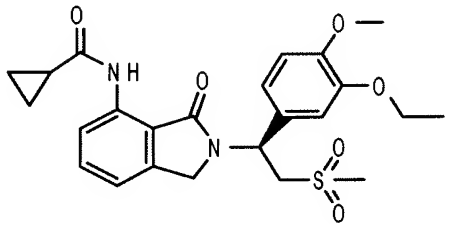
(a) administering to a patient having the myeloproliferative disease a therapeutically or prophylactically effective amount of cyclopropanecarboxylic acid {2-[(1*S*)-1-(3-ethoxy-4-methoxy-phenyl)-2-methanesulfonyl-ethyl]-3-oxo-2,3-dihydro-1*H*-isoindol-4-yl}-amide, or a pharmaceutically acceptable salt thereof, , for a period of time followed by rest; and

(b) repeating step (a), before, during or after transplanting umbilical cord blood, placental blood, peripheral blood stem cell, hematopoietic stem cell preparation or bone marrow in the patient,

wherein the myeloproliferative disease is selected from the group consisting of polycythemia rubra vera, primary thrombocythemia, chronic myelogenous leukemia and agnogenic myeloid metaplasia, and wherein the therapeutically or prophylactically effective amount is from about 5 mg to about 50 mg per day.

23-40. (Canceled).

41. (Previously Presented) The method of claim 1, 3 or 22, wherein the compound as a free base has the following structure:



42. (Previously Presented) The method of claim 1, 3 or 22, wherein the compound is administered orally.

43. (Previously Presented) The method of claim 42, wherein the compound is administered in the form of a capsule or tablet.

44. (Previously Presented) The method of claim 1, 3 or 22, wherein the compound is administered in an amount of about 10 mg, about 20 mg, about 25 mg or about 50 mg per day.

45. (Previously Presented) The method of claim 1, 3 or 22, wherein the compound is administered in an amount of from about 10 mg to about 25 mg per day.

46. (Previously Presented) The method of claim 1, 3 or 22, wherein the compound is administered in an amount of about 20 mg per day.

47. (Previously Presented) The method of claim 1, 3 or 22, wherein the compound is a pharmaceutically acceptable salt.

48-49. (Canceled).

50. (Withdrawn) A method of treating agnogenic myeloid metaplasia, which comprises administering to a patient having agnogenic myeloid metaplasia from about 5 mg to about 50 mg per day of cyclopropanecarboxylic acid {2-[(1*S*)-1-(3-ethoxy-4-methoxy-phenyl)-2-methanesulfonyl-ethyl]-3-oxo-2,3-dihydro-1*H*-isoindol-4-yl}-amide and a therapeutically effective amount of rituximab.

51. (Withdrawn) A method of treating agnogenic myeloid metaplasia, which comprises administering to a patient having agnogenic myeloid metaplasia from about 5 mg to about 50 mg per day of cyclopropanecarboxylic acid {2-[(1*S*)-1-(3-ethoxy-4-methoxy-phenyl)-2-methanesulfonyl-ethyl]-3-oxo-2,3-dihydro-1*H*-isoindol-4-yl}-amide and a therapeutically effective amount of fludarabine.